

Editorial

The COVID-19 pandemic calls for spatial distancing and social closeness: not for social distancing!

To reduce transmission of COVID-19, people in public should stay 2 m away from each other. This is considered a minimum safe distance by public health authorities who promote further measures that include curfews and lockdowns to separate people. In these ways, the incidence of “social distancing” is keeping pace with the spread of COVID-19.

However, as one psychologist points out, social distancing also “pushes against human beings’ fundamental need for connection with one another”

(<https://news.stanford.edu/2020/03/19/try-distant-socializing-instead/>). The public health consequences of limiting close human connections may soon include mental health problems such as depression and anxiety, and domestic violence. Gun and ammunition sales have soared in the USA, while in Switzerland justice departments are preparing for increases in domestic violence. Community health services will be challenged even further.

Multichannel messaging now augments mail and the telephone. People are reaching out to each other in these old and new ways to sustain collective solidarity and redefine the social in their communities. In many cities and countries, new neighbourhood initiatives are emerging in direct response to the corona crisis to offer help for those in need such as persons who belong to high-risk groups that should stay at home. Thus does effective public health entail both physical distance, and social support.

Empathy, shared responsibility, and collective understanding encompass social support that is complementary to the biomedical measures that interrupt transmission. Both are key to overcoming this crisis. We assert that “social distancing” does not convey this dual character.

In fact, in societies less individualised than most Western countries the term “social distancing” may be perceived as problematic, and disturbing in social and cultural contexts in which people are used to turn to each other when times get rough. Often these are countries that are prone to be even harder struck by the COVID-19 pandemic because of poor conditions based on weak economies, weak infrastructures etc..

We suggest that spatial distancing should be the term used when distance between individuals or objects addressed. Grounded in biological and epidemiological data, *spatial distance* means physical extent: 2 m. Shared responsibilities inhering in people's social and cultural contexts afford *social closeness*. Public health should approach the threat of COVID-19 by promoting spatial distance together with social closeness.

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